



TRANSMITTAL FORM

(to be used for all correspondence after final)

Total Number of Pages in this Submission: 1/7

| | |
|------------------------|-------------------|
| Application Number | 08/937,258 |
| Filing Date | 09/13/97 |
| First Named Inventor | Richard J. Ditzik |
| Group Art Unit | 2774 |
| Examiner Name | Lao, L |
| Attorney Docket Number | |

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APR 14 1999

Group 2700

ENCLOSURES (check all the apply)

| | | |
|--|--|--|
| <input type="checkbox"/> Fee Transmittal Form | <input type="checkbox"/> Assignment Papers (for application) | <input type="checkbox"/> After Allowance Communication to Group |
| <input checked="" type="checkbox"/> Fee Attached | <input type="checkbox"/> Drawing(s) | <input type="checkbox"/> Appeal Communication to Board of Appeals and Interference |
| <input type="checkbox"/> Amendment Response | <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) |
| <input checked="" type="checkbox"/> After Final | <input type="checkbox"/> Petition Checklist and Accompanying Petition | <input type="checkbox"/> Proprietary Information |
| <input type="checkbox"/> Expressed Abandonment Req. | <input type="checkbox"/> To Convert a Provisional Application | <input type="checkbox"/> Status Letter |
| <input type="checkbox"/> Extension of Time Request | <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address | <input type="checkbox"/> Additional Enclosure(s) (please identify below): |
| <input type="checkbox"/> Information Disclosure Statement | <input checked="" type="checkbox"/> Terminal Disclaimer under 37 CFR 1.321 | |
| <input type="checkbox"/> Certified Copy of Priority Documents | | |
| <input type="checkbox"/> Response to Missing Parts/incomplete Application | | |
| <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | | |

Remarks

Fee as provided under 37 CFR 1.20(d): \$55.00 (small entity).

Signature of Applicant, Attorney, or Agent

| | |
|--------------------------|--------------------------|
| Firm or Individual name: | RICHARD J. DITZIK |
| Signature: | <i>Richard J. Ditzik</i> |
| Date: | 4-8-99 |

FEE TRANSMITTAL



Complete if Known

| | |
|------------------------|-------------------|
| Application Number | 08/937,258 |
| Filing Date | 09/13/97 |
| First Named Inventor | Richard J. Ditzik |
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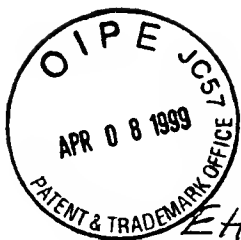
Total Amount of Payment (\$)

| Method of Payment (Check One) | | | | Fee Calculation (continued) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|-----------------|--|--------------|--|------|--|-------|--------------|--|-----------------|----------|----------|----------|-----|--|---|--|-----|--|--|--|-----|--|---|--|-----|--|--|--|-----|------|----------------------|------|
| 1. _____ Commissioner is here be authorized to charge indicated fees and credit any over payment to: Deposit Account Nr. _____ | | | | 3. ADDITIONAL FEES | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2. <input checked="" type="checkbox"/> Payment Enclosed <input checked="" type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other | | | | <table border="1"> <thead> <tr> <th colspan="2">Small Entity</th> <th rowspan="2">Fee Description</th> <th rowspan="2">Fee Paid</th> </tr> <tr> <th>Fee Code</th> <th>Fee (\$)</th> </tr> </thead> <tbody> <tr> <td>215</td> <td></td> <td>Extension for response within first month</td> <td></td> </tr> <tr> <td>216</td> <td></td> <td>Extension for response within second month</td> <td></td> </tr> <tr> <td>217</td> <td></td> <td>Extension for response within third month</td> <td></td> </tr> <tr> <td>218</td> <td></td> <td>Extension for response within fourth month</td> <td></td> </tr> <tr> <td>248</td> <td>\$55</td> <td>Statutory Disclaimer</td> <td>\$55</td> </tr> </tbody> </table> | | | | Small Entity | | Fee Description | Fee Paid | Fee Code | Fee (\$) | 215 | | Extension for response within first month | | 216 | | Extension for response within second month | | 217 | | Extension for response within third month | | 218 | | Extension for response within fourth month | | 248 | \$55 | Statutory Disclaimer | \$55 |
| Small Entity | | Fee Description | Fee Paid | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Fee Code | Fee (\$) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 215 | | Extension for response within first month | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 216 | | Extension for response within second month | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 217 | | Extension for response within third month | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 218 | | Extension for response within fourth month | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 248 | \$55 | Statutory Disclaimer | \$55 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Fee Calculation | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 1. FILING FEE | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Small Fee Code | Entity Fee (\$) | Fee Discription | Fee Paid | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 201 | 380 | Utility filing fee | \$380 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 206 | 155 | Design filling fee | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 207 | 240 | Plant filing fee | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 208 | 380 | Reissue filing fee | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 214 | 75 | Provisional filing fee | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Subtotal (1) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2. CLAIMS | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| | | Extra | Fee fm below | Fee Paid | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total Claims: | 11 | -20 = | X | = | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Independent Claims: | 4 | -3 | 1 X | \$39= | \$39 | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Multiple Dep. Claims: | | | X | = | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Small Entity | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Fee Code | Fee (\$) | Fee Description | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 203 | \$9 | Claims in excess of 20 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 202 | \$39 | Independent claims in excess of 3 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 204 | \$130 | Multiple dependent claim | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 209 | \$39 | Reissue indep. Claims over original | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 210 | \$9 | Reissue claims in excess of 20 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| SUBTOTAL (2) | | | \$419 | SUBTOTAL (3) | | | \$479 | | | | | | | | | | | | | | | | | | | | | | | | | | |

| | | | | | |
|----------------------|-------------------|--|--|---------------------|--------|
| SUBMITTED BY: | | | | Complete (if known) | |
| Typed Name | Richard J. Ditzik | | | Reg. Number | |
| Signature | | | | Date | 4/8/99 |
| | | | | Deposit Account | |
| | | | | User ID | |

08/937,258

AF/GP2774\$



Certificate under 37 CFR 1.10 of Mailing by "Express Mail"

EH239063041 US

"Express Mail" label number

8 April 1999

Date of Deposit

I hereby certify that this correspondence is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.

Richard J. Ditzel

Signature of person mailing correspondence

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Group 2700

Richard J. Ditzel

Typed or printed name of person mailing correspondence

Note: Each paper must have its own certificate of mailing by "Express Mail".